

Quarterly Totals

Demographic Reporting Form

Positive Alternatives

Date: Quarter 5 7/1/15-9/30/15 Grantee Name: Health Resources LifeCare Center

1. Client Age Range:

Under 15	15-17	18-19	20-24	25-29	30-34	35+	Unknown age
0	0	1	7	7	6	2	0

2. Client Pregnancy Status:

1st Trimester	2nd Trimester	3rd Trimester	Post-partum	Pregnancy Status Unknown
14	3	1	5	0

3. Client Marital Status:

Married	Not Married	Marital Status Unknown
6	16	1

4. Client Race:

Race: White	Race: African-American	Race: African-African	Race: American Indian	Race: Asian Pacific	Race: Other/ Multi Race	Race: Unknown
20	2	0	0	0	1	0

5. Client Ethnicity:

Hispanic Ethnicity: Yes	Hispanic Ethnicity: No	Ethnicity: Unknown
3	20	0